



NATIONAL ASSOCIATION  
OF VISION CARE PLANS

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Testimony  
Of  
National Association of Vision Care Plans (NAVCP)  
Before  
The Insurance and Real Estate Committee  
February 24, 2015

HB 6736 "AN ACT PROHIBITING THE SETTING OF PAYMENTS BY HEALTH INSURERS AND OTHER ENTITIES  
FOR NONCOVERED BENEFITS"

Chairmen Crisco and Megna, Ranking Members Kelly and Sampson, Members of the Committee, the National Association of Vision Care Plans (NAVCP) appreciates the opportunity to submit written testimony on HB 6736.

mNAVCP's 20 primary member companies manage extensive networks of vision care providers and include vision benefit coverage for *over 119 million Americans*. NAVCP strives to improve quality and efficiency in the delivery of vision care and promotes the value and importance of vision care and vision benefits to both consumers and employers. Our members provide a competitive market to consumers and vision care providers alike, offering a variety of business models so that employers, individual consumers, and vision care providers can select the networks they need. While we have opposed similar legislation nationally and in Connecticut, we can support H.B. 6736 so long as its language provides a narrow extension of Connecticut General Statutes Section 38a-472h from addressing only dental services and procedures to including optometric services and procedures.

In 2010 the National Conference of Insurance Legislators (NCOIL) developed model language specific to dental plans and the provision of dental services, requiring that for dental plans to establish pricing for these services, they would be required to provide coverage. The provision of specialty care differs greatly from specialty to specialty. What might be the correct policy in the context of dental coverage may not be the correct policy when addressing vision, hearing, mental or behavioral health coverage. As the association representing the vision care plan industry, we are acutely aware that the vision care market is very different than that for dental care.

With these differences in mind, we can support H.B. 6736's extension of Section 38a-472h to optometric services and procedures because it reflects the differences between the dental and vision plan markets. Typically vision plans cover most routine vision services provided by our network providers, subject to annual or other limits. H.B. 6736 would require this to be the case uniformly in Connecticut. However, in most routine eye care visits, this is just one of two transactions. In addition to services and procedures, consumers frequently desire to purchase eye ware, lenses, or other retail materials. Our plans want our enrollees to utilize our preferred providers for these purchases, and incentivize them to do so. Accordingly vision plans cover materials (lenses, frames, etc.), in a variety of ways under the terms of a vision services policy. This is necessary because at retail, there are a high number of fashion and utility variables that go into consumer selection of vision products. Additionally, there is no comparable measure for the usual and customary pricing found in dental or other specialty services. In short – this is the purchase of a product, not a service. Accordingly, our plans negotiate with optometrists to provide a variety of discounts and

coverage on materials priced by the optometrist. Some of our members offer coverage of one or more frames and lenses, subject to limits, but do not cover tinting or coating. Other vision plans provide an allowance and/or a discount for the purchase of materials.

NAVCP supports the extension of Section 38a-472h to optometric services and procedures. This allows uniformity of coverage to optometrists while allowing vision care plans the flexibility to structure their networks and provide competitive offerings to their enrollees.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Roberts". The signature is fluid and cursive, with a large initial "J" and a stylized "R".

Julian Roberts  
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